



**STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
AUCTIONEER COMMISSION**

500 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37243-1153

**APPLICATION FOR PUBLIC
AUTOMOBILE AUCTION LICENSE**

1. Business name in which license will be issued and advertising will be conducted.

a) Mailing address _____
(Street & Number) (City) (State) (Zip Code)

b) Physical address _____
(Street & Number) (City) (State) (Zip Code)

c) Business Address _____
(Street & Number) (City) (State) (Zip Code)

d) Phone _____ Fax _____ E-mail _____

2. Is applicant a corporation __, partnership __, association __, company, __, or proprietorship __ (individual)

If corporation, indicate state in which incorporated _____ (attach charter)

3. Tennessee Auto Dealer License Number _____, issuance date _____

4. Tennessee designated principal auctioneer name _____ auctioneer license number _____, issuance date _____

Tennessee auctioneer firm affiliation number _____, issuance date _____

Tennessee auctioneer firm affiliation name _____

5. Has any partner, officer, owner, or director ever been indicted for or convicted of a felony or other charges involving embezzlement, obtaining money under false pretenses, larceny, or extortion?

No __ Yes __ (If YES, attach all court documentation and a letter of explanation).

6 Are there any civil suits or judgments pending against any partner, officer, owner, or director at this time? No __ yes __ (If Yes, attach a letter of explanation). Where? _____

7. Has any partner, officer, owner, or director ever had an auctioneer's license, real estate brokers or any other type of occupational license suspended, revoked, refused or disciplined by this State or any other State? No—Yes __ (If Yes, attach a letter of explanation).

8. Does the principal auctioneer for the Public Automobile Auctioneer License understand and accept that he will be held accountable for all professional actions of all members and employees of the firm when operating within the scope of their professional activities?

No __ Yes __

9. I hereby certify that the statements in or attached to this application are true and correct to the best of my knowledge and belief; that the members of this organization are familiar with the provisions of the law under which this application is made; and that I, as proprietor, partner, owner, or proper officer of the corporation, have authority to make the statements contained herein.

DATE: _____

SIGNED: _____
PERSONAL SIGNATURE OF APPLICANT OR AUTHORIZED OFFICIAL OF FIRM

E-MAIL ADDRESS: _____

TITLE: _____

AFFIDAVIT
(Read Carefully)

The undersigned by submitting this application to the Tennessee Auctioneer Commission for a license to conduct business under the provisions of the Auctioneer's License Act of 1967, as amended, swears (or affirms) that he or she has read and is thoroughly familiar with the provisions of the aforementioned Act, and agrees to fully comply with them. The undersigned further swears (or affirms) that all of the information given in this application is true to the best of his or her knowledge and belief.

Signature: Owner(s) of Business

Signature of designated TN licensed auctioneer

Print Name(s)

Print Name

Subscribed and sworn to before me this _____, day of _____ 20_____

(Seal)

My commission expires _____

County State

Notary Public

MAIL APPLICATION AND FEES TO:

DEPARTMENT OF COMMERCE & INSURANCE
TENNESSEE AUCTIONEER COMMISSION
500 JAMES ROBERTSON PKWY
NASHVILLE, TN 37243-1153